



**Robert E. Bush**  
Naval Hospital

## Did you know?...

**Y**ou have the right to express your concerns about patient safety and quality of care.

There are several avenues open to you:

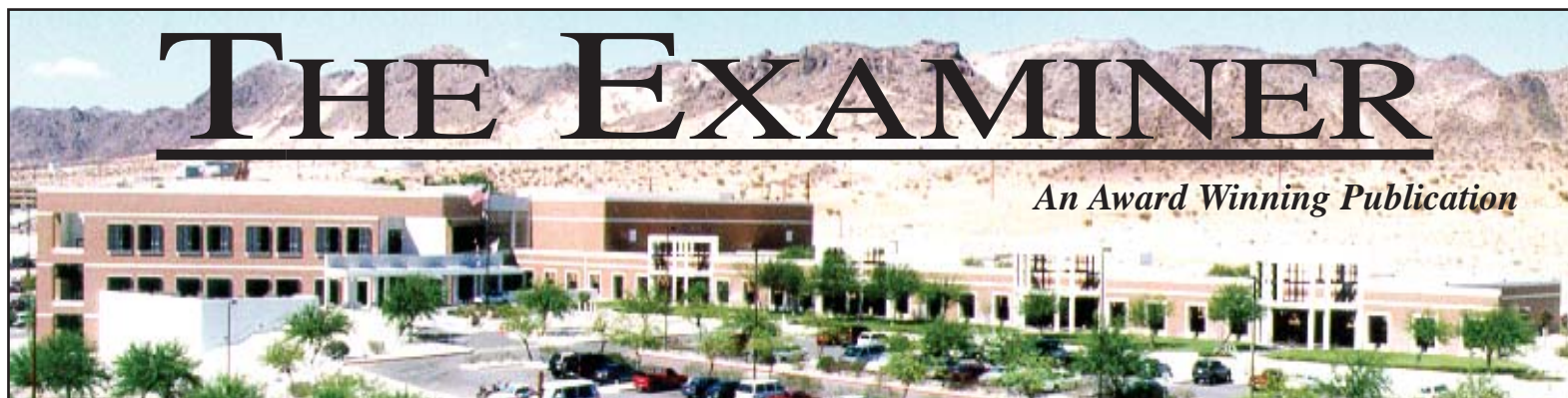
- \* Through the ICE website.
- \* The Hospital Customer Relations Officer at 760-830-2475, or any of the Customer Relations representatives in the Hospital clinics, or directly to the Joint Commission via: E-mail at [complaint@jointcommission.org](mailto:complaint@jointcommission.org) Fax: 630-792-5636

The Joint Commission  
Oak Renaissance Boulevard  
Oakbrook Terrace, IL 60181

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DoD IG: 1-800-424-9098

Commanding Officer  
Naval Hospital Public Affairs Office  
Box 788250 MAGTF-TC  
Twentynine Palms, CA 92278-8250



<http://www.med.navy.mil/sites/nhttp/pages/default.aspx>

# Cmdr. Enzerillo Directs Hospital Business

*By Dave Marks*  
*Public Affairs Officer*  
*Naval Hospital Twentynine Palms*



**Cmdr. Suzette Inzerillo,**  
**Director Of Healthcare**  
**Buisness Operations**

Cmdr. Suzette Inzerillo knew from an early age she wanted to be a nurse. At the age of 17 she enrolled in a residential nursing school and graduated in three years. Inzerillo spent the next two years at the Medical College of Virginia earning her RN. With her registered-nursing degree in hand, Inzerillo transitioned directly into the Nursing

Corps as a freshly minted ensign. Among the many credentials and degrees adorning her office wall, she is most proud of her RN degree. "I felt so honored to receive my commission as a result of that degree," she said. And it's why her registered nurse diploma sits higher on the wall than her two Master's degrees.

At Naval Hospital Twentynine Palms, Cmdr. Inzerillo is Director of Healthcare Business Operations.

Her job entails managing hospital business operations and assuring Tricare standards and access to care are managed properly. Inzerillo also manages all referrals, determining whether patients stay in-house or are referred to another facility. She performs these tasks in collaboration with a staff of 23; the majority of whom are Department of Defense civilians, with enlisted personnel completing her crew. Inzerillo describes her staff as outstanding. "I'm blessed to have a very dedicated staff and very dedicated civilians that take care of our Marines and their families," she

said.

Inzerillo has two case managers assigned to the Wounded Warrior Program. She also manages hospital customer relations.

As a hospital Director, Inzerillo has an MBA and a Master's in Nursing. When she sees individual patients, it's usually a customer-relations matter.

She has worked in medical inpatient surgery and is a certified Ambulatory Care Nurse. She's been an administrator for the past eight years, but is always ready to lend a hand

with direct patient care. "Even as head nurse, I would be Nurse of the Day, starting IVs and helping with code blues," she said.

In 2011, Inzerillo volunteered for a short-fused deployment to Afghanistan and was prepared to ship out as a staff nurse. Her orders were cancelled several weeks prior to deployment. "I didn't get to go," she said, but she has the expectation that if called to duty in a combat zone, she would gladly serve.

*Continued on page 7*

## Hospital Soccer Team Wins Trophy!



**Congratulations! NHTP Soccer team poses with Capt. J.C. Sourbeer, M.D., and HMC Victor Isarraraz. NHTP won, 6-2, against 1st Tanks in the championship game played Sept. 5. Top row from left: Cpl Jarrod Goff, TTECG; LCpl Luccas Masslach, HQ BN; LCpl Hugo Antonez; HM3 Ernest Akore; HM2 George Mingle, PACU; Cpl Angel Vallverde; HN Abdou Lalane LCpl (Diablo) Bedoya; Middle row: Michael Gamel; LCpl Ethan Curnoh, HQ BN; LCpl Conlin; LCpl Oscar Almodova.**

*The team recieved champion t-shirts following the game, and a trophy presentation was held on Sept 23 in NHTP. The trophy may be viewed in the display case outside the Ship's Mess.*

**Patients seen in August -- 12,346**

**Appointment No Shows in August -- 763**

In August we had a 5.8 percent no show rate. We need to keep trending downward by keeping the appointments we make, or by canceling in enough time for someone else to use the slot...

To help patients obtain appointments, the Naval Hospital now shows the number of open appointment slots each day on the hospital Facebook site, check it out.

**To make an appointment call -- 760-830-2752**

**To cancel an appointment call -- 760-830-2369**



# Bullying, Mobbing Devastates Workplace, Individual

*By Martha Hunt, MA, CAMF  
Health Promotion and Wellness  
Robert E. Bush Naval Hospital*

October is Bully Awareness Month. Research shows that workplace bullying affects upwards of 47 million American workers annually. Nearly 15 million Americans report bullying on a weekly basis. In fact, bullying in the U.S. is four times more prevalent than discrimination due to race, gender, ethnicity, religion, disability, or age.

According to National Institute for Occupational Safety and Health (NIOSH), workplace bullying refers to “repeated, unreasonable actions of individuals (or a group) directed towards an employee (or a group of employees), which are intended to intimidate, degrade, humiliate, or undermine; or which cre-

ate a risk to the health or safety of the employee(s)”.

Workplace bullying may involve an abuse or misuse of power or it may come in the form of abuse from others in a different work area. Bullying behavior creates feelings of defenselessness and injustice in the victim and undermines an individual’s right to dignity at work.

Bullying is different from aggression. Aggression may involve a single act while bullying involves repeated, ongoing attacks against the victim. Examples of bullying include unwarranted or invalid criticism, blame without factual justification and being treated differently than the rest of your work group. Bullying includes being sworn at, exclusion or social isolation and being shouted at or being humiliated. Bullying also involves excessive monitoring or micro-managing and being

given unrealistic deadlines. Victims of bullying experience significant physical and mental health problems. Mental health problems can include high stress levels, Post-Traumatic Stress Disorder (PTSD), high rates of absenteeism, reduced self-esteem, phobias, increased depression/self-blame and family problems. Physical problems may include musculoskeletal problems such as unexplained aches and pains, sleep disorders and digestive disturbances.

Mobbing is when employees bully each other. The term mobbing refers to a group of coworkers targeting another worker. Supervisors should intervene immediately to address and stop mobbing behaviors. Mobbing reduces the employee’s ability to perform his/her work. Mobbing results in less job satisfaction, worse psy-

chological health, workplace tension, greater propensity to leave the organization, presenteeism (at work but gets nothing done), and job burnout. Victims of mobbing are usually above average when compared to their coworkers. There may be rumors and gossip spread about the victim, the victim may not be invited to meetings or included in committees, or the victim may exclude themselves from a situation due to the emotional stress.

Victims of mobbing find that any perceived error is met with the group conviction that the victim needs formal punishment to be taught a lesson. According to NIOSH, there may be emotion-laden, defamatory rhetoric about the target in oral and written communications with meetings to discuss what to do about the target.

There is often a high value on secrecy, confidentiality, and group solidarity among the mobbers which makes it dangerous for fellow coworkers to speak for or defend the victim. Mobbers tend take matters into their own hands and may express unfounded fear of violence from the victim.

Benefits of addressing disruptive behavior include improved staff satisfaction and retention, enhanced reputation for the organization, a culture of professionalism, improved safety and quality of care, greater staff willingness to speak up on problems and a more civil, productive, and desirable workplace. For more information on workplace bullying, go to [www.cdc.gov/niosh/](http://www.cdc.gov/niosh/).

## Mentoring Makes Better Nurses

*By Lt. Cmdr. Shauna R. King-Hollis, Behavioral Health  
Robert E. Bush Naval Hospital*

When nurses take time to share the lessons learned from their career paths the benefits are beyond measure. Some of the known results of mentoring nurses include: Pursuit of advanced education; career progression including promotion, increased salary and a sense of accomplishment. Another benefit of mentoring is retention of the finest nurses in the United States Navy.

A Career Development *Lunch and Learn* was hosted on June 6 by Naval Hospital Twentynine Palms’ Executive Committee of the Nursing Staff (ECONS) and participating Senior Nurses to provide education and support for pursuing advanced nursing skills.

The following nursing senior nursing staff presented: Lt. Cmdr. Timothy P. Brender, Pediatric Nurse Practitioner (PNP); Cmdr. Michelle A. French, Perioperative Clinical Nurse Specialist (PCNS); Lt. Cmdr. Shauna R. King-Hollis; Lt. Cmdr. Valerie V. Singleton, Psychiatric Mental Health Nurse Practitioner (PMHNP); Lt. Cmdr.

Michelle E. Weddle, Family Nurse Practitioner (FNP); Cmdr. Raul J. Carrillo, Emergency Nursing; Cmdr. James D. Fountain, Certified Registered Nurse Anesthetist (CRNA); Cmdr. (now Navy Capt.) Lisa M. Morris, Career Development; Cmdr. Evelyn M. Quattrone, Certified Nurse Midwife (CNM); Navy Capt. Sandra A. Mason, Operational Assignments; Navy Capt. Cynthia J. Gantt, Executive Nursing and Leadership.

The presentations included displays and interviews with Senior Nurses who shared their career tips for advanced nursing, their suggestions for attaining advanced degrees, including preparation for Graduate Record Examinations (GRE), applying for Duty Under Instruction (DUINS), attending Uniformed Services University of the Health Sciences (USUHS), Incentive Specialty Pay (ISP), national certification, and operational opportunities.

The event was well attended. Participants requested that future mentoring symposiums include topics such as how to manage personal and professional goals when planning a Navy medical career.

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The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month’s edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

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# Confidentiality is Assured When Seeking Advice/Guidance from Navy Chaplains

By **Christianne M. Witten**  
Chief of Chaplains Public Affairs

**"Confidentiality can be particularly important when a Sailor or Marine may feel they have nowhere to turn during a personal crisis, or if they're concerned about command involvement or an impact on their career." - Rear Admiral Mark L. Tidd, Chief of Navy Chaplains**

WASHINGTON (NNS) -- In a recent poll on Navy Personnel Command's website, 63 percent of 5,049 respondents did not believe that what they say to a chaplain is confidential, and 65 percent of 2,895 respondents believe that Navy chaplains are required to report certain matters to the command.

In light of these results and other anecdotal evidence, Chief of Chaplains, Rear Adm. Mark L. Tidd, saw an opportunity to

roll out an official campaign to help educate service members, leadership and families across the Navy and Marine Corps on *SECNAV Instruction 1730.9: Confidential Communications to Chaplains*.

This policy was established on Feb. 7, 2008 to protect the sacred trust between an individual and a chaplain.

Per Navy policy, service members and families have the right and privilege to confidential communication with a Navy chaplain. Chaplains have the obligation and responsibility to protect and guard the confidential communications disclosed to them; and commanders honor and support the unique, confidential relationship between an individual and a chaplain.

## Traveling Safely

By **HN Max D. Mitrovich**  
Adult Medical Care Center  
Robert E. Bush Naval Hospital

Isolation can be a killer. Being stuck on the side of the road for hours can be a serious issue on the outskirts of Twentynine Palms. If you are travelling to Las Vegas or Arizona, it's wise to map out the locations of service stations and their hours of operation. If it's your first trip, even more precautions should be taken to assure you arrive alive.

Carry lots of water. Bring enough for you and your passengers for at least 24 hours. When the sun's beating down and the car's not moving, you'll be glad to have it. Bring extra water for the car's radiator. Cracked radiator heads or coolant leaks can happen anywhere, but especially in areas of extreme temperatures.

Stop at gas stations at every opportunity. This rule applies when you know there's a long interval between service stations. Use this opportunity to top off and check automobile fluid levels. Also, take advantage of the service station facilities. Avoid tire blowouts by avoiding questionable roads.

If your car does break down, stay with it. Your vehicle is the tree you are hugging, unless you can clearly see a place to get help. If you do leave, attach a note to your vehicle so searchers or authorities can find you.

If you are planning on hiking, biking, or four-wheeling in extreme, isolated locations, take a satellite phone. Rock faces, caves and other natural structures may interfere with phone services, or there may not be any phone service.

You should have a plan on where you are going and when you'll arrive. And share it with others. In the movie, *27 Hours*, an experienced rock climber/mountain biker fails to inform anyone as to his destination. As a consequence, he must perform his own remedial surgery (based on true story). You should leave word with a friend, neighbor, relative, or your chief petty officer.

Having fun and exploring this magnificent landscape is one of the benefits of living in the high desert. Personal safety should be one of your highest considerations. Prevent dangers by planning ahead.

Chaplains cannot be compelled by the command, medical professionals or others to disclose what a service member or family member shares in confidence.

"What you say to us stays between us, unless you decide differently- You hold the key," said Tidd. "That being said, chaplains will always assist in guiding an individual to the appropriate resources and will not leave an individual alone when the individual or others are at risk," Tidd added.

Chaplains serve as advocates to help individuals get the support needed to overcome the challenges they face before matters escalate. "This unique relationship between an individual and a chaplain can serve as a valuable safety valve to the commander to facilitate increased morale and mission readiness," Tidd said.

Given the continuing stigma service members associate with seeking help, chaplains offer Sailors, Marines and their fami-

lies a safe place to talk -- without fear or judgment.

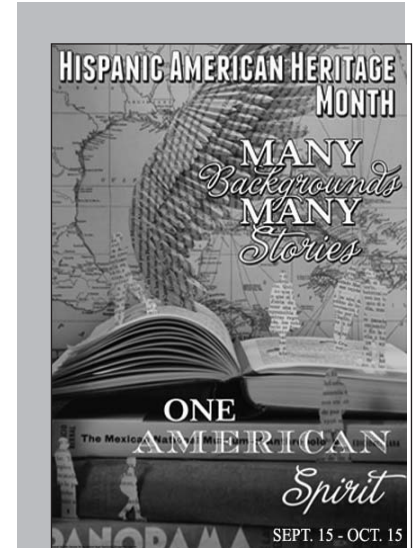
"Confidentiality can be particularly important when a Sailor or Marine may feel they have nowhere to turn during a personal crisis, or if they're concerned about command involvement or an impact on their career," Tidd said.

In addition to a *Message to the Fleet* on confidentiality, the Chaplain Corps has established a resource page devoted to confidentiality on its website: [www.chaplain.navy.mil](http://www.chaplain.navy.mil).

This page includes frequently asked questions, a fact sheet, a flyer, as well as a link to official policy.

"The Chaplain Corps is committed to caring for all with dignity, respect and compassion, regardless of an individual's beliefs, if any. One of the ways we do this is through confidentiality," Tidd said.

*For further information, contact your command chaplain today.*



## Protecting Brain Works Both Ways

More than 1 million mild traumatic brain injuries occur nationwide each year. These injuries can be caused by falls, car crashes or recreational activities like bike riding, skateboarding, skiing or even playing at the playground. More than half of concussions occur in children, often when playing organized sports such as football and soccer.

Common symptoms include nausea, headache, confusion, dizziness and memory problems. Loss of consciousness occurs in about 1 in 10 concussions. A person with a concussion might have trouble answering basic questions and move in an awkward, clumsy way.

Symptoms can arise quickly, or they can be delayed and appear over the next day or two.

Body-related symptoms, such as headache and dizziness, tend to fade fairly quickly. But thinking-related symptoms, including problems with memory and paying attention, tend to linger in some kids. Children who had lost consciousness or had some additional abnormality that showed up on MRI scans after the injury had an increased risk

for lasting problems.

These kids were also more likely to have what looked like significant reductions in overall quality of life. And there was some evidence they were more likely to have academic problems than the kids without persistent symptoms.

Take steps to avoid concussions. Wear helmets when appropriate, such as if you're bicycling, skate-boarding or riding a horse. Athletes can decrease their risk of concussion by wearing proper head-

gear and following the rules of good sportsmanship. Make living areas safer for seniors by removing tripping hazards such as throw rugs and clutter in walkways, and install handrails on both sides of stairways.

**Note: This National Institutes of Health article was edited to fit available space. Complete article is available at: <http://newsinhealth.nih.gov/issue/May2013/Feature1>.**



# Super Stars...



**HM2 (FMF) Ricky L. Galan** relists for six more years on Sept. 13.



**Cmdr. Brenda D. Smith, Director, Branch Clinics and Industrial Hygiene Officer,** receives a Meritorious Service Medal (Gold Star in lieu of Third Award) from **Capt. J.C. Sourbeer, M.D., Hospital Commanding Officer.**



**Ms. Beverly Enos, Comptroller's Office,** receives her Federal Length of Service Award for 25 years of faithful service.



**HM3 Pricilla Herrera** receives the Navy and Marine Corps Achievement Medal for superior performance in the Surgical Services Directorate.



**LTJG Jenna E. Dimaggio** receives the Navy and Marine Corps Achievement Medal for superior performance as staff nurse in the Emergency and Obstetrics/Gynecology departments.



**LS2 (SW) Marcus J. Boyd** receives a Navy and Marine Corps Achievement Medal (Gold Star in lieu of Seventh Award) for superior performance as Assist. Leading Petty Officer in the Materials Management Department.



**HM3 Kyle D. O'Neil** receives the Navy and Marine Corps Achievement Medal for superior performance in the Staff Education and Training Directorate.



**Lt. Cmdr. Jeffery S. Sorensen** receives the Navy and Marine Corps Commendation Medal (Gold Star in lieu of Second Award) for meritorious service while serving as staff family physician.



**Ms. Colleen Sawaia-Moore** receives a letter of Commendation from hospital Commanding Officer, **Capt. J. C. Sourbeer,** for selection as Senior Civilian of the Quarter for superb performance in the Directorate of Resource Management.



**Chief Hospital Corpsman (SW) Augustus C. Delarosa** receives the Navy and Marine Corps Commendation Medal (Gold Star in lieu of Second Award) for meritorious service while serving as senior enlisted leader, Directorate for Administration and Clinical Support Services.



**HM3 Gennadiy Birman** receives the Navy and Marine Corps Achievement Medal for superior performance in the Pediatric Clinic and as Uniformed Patient Advocate.



**HM3 Matthew P Moffitt** receives the Navy and Marine Corps Achievement Medal for superior performance as Leading Petty Officer in the Multi-Service Ward and in the Maternal Infant and Nursing Department.



**Lt. Katherine E. Pierce** receives the Navy and Marine Corps Commendation Medal from Hospital Commanding Officer, **Capt. J. C. Sourbeer,** for providing expert clinical oversight and training to mental health providers in the Mental Health Department.



**HM3 Sean N. Mena** receives the Navy and Marine Corps Achievement Medal for superior performance in the Pediatrics and Maternal Infant Nursing Department.







Following the Pinning Ceremony of HMC (SW/AW) Tracy L. Ashley (fifth in from left) and CSC (SW) Danilo Buenaflor (fifth in from right) on Sept. 13, attendant chiefs pose for a group shot.



Cdr. Brennan Autry, Director for Administration, Naval Hospital Twentynine Palms, is flanked by his mother, Susan, and wife, Stephanie (right), during his promotion on Sept. 6.



CSC (SW) Danilo B. Buenaflor receives help from CSC (SW) Jose Ramirez, Gisselle (sister), and mother, Maria (right), at his Pinning Ceremony Sept 13.



Cmdr. Mark Woodbridge states the oath of office Sept. 6 during his promotion ceremony.



HMC (SW/AW) Tracy L. Ashley is assisted by HMCS Carl White during the Chiefs' Pinning Ceremony Sept 13.



HN Carris Munoz, Patient Administration, belts out Broken Wing to take 1st Place in the NHTP Talent Show Sept 25.



Lt. Cmdr. Joshua E. Blackburn gets an assist replacing his rank insignia during his promotion ceremony Sept. 3.



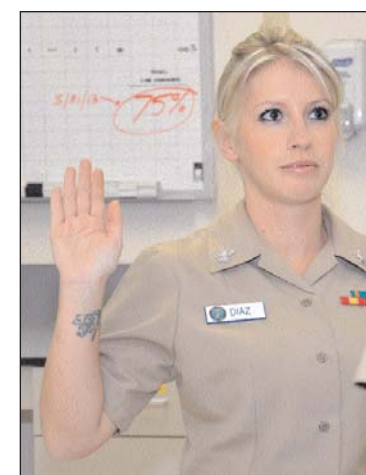
LTJG Jessica Anderson is promoted on the Quarterdeck Aug. 26.



Lt. Adeniyi Alatise, Mental Health Clinic, is welcomed back from his Kandahar deployment by Command Master Chief Merricks.



HM2 Alexei B. Novak reenlists for three more years on Aug. 30 on the Quarterdeck.



HM2 Brittany Diaz reenlists for three more years Sept 20 in the hospital laboratory.



Lt. Cmdr. Lisa K. Gibson, Family Practice, is welcomed home by Hospital Commanding Officer J.C. Sourbeer, M.D., upon her return from a six-month deployment to Kandahar, Afghanistan.



# Introducing New Staff - Welcome Aboard



**Command Master Chief Carol Merricks**

*Command Master Chief Carol Merricks has been in the Navy for 24 years. She started as a dental technician and has been in hospital leadership for the past 10 years. She returned to the Dental sub-specialty at Naval Medical Center San Diego where she was Senior Enlisted Leader for the Branch Dental Clinic. Master Chief Merricks earned her BA in Arts and Science from Excelsior College and has successfully completed both the Senior Enlisted Course and the Command Leadership School in Newport, R.I. Her hobbies include reading and spending time with her children, Aiyah, 18, and Dante, 17. She looks forward to mentoring the enlisted staff and enjoys the greater sense of community smaller hospitals offer. "My goal, more than anything else, is to continue the sense of teamwork and community we have here. For all of the enlisted sailors in this command, I want to give them what they need to be successful in their jobs and get them promoted," she said.*

*Natalie K. Monroe, from Seattle, Wash., has been a registered nurse for three years and is newly assigned to Labor and Delivery. Monroe enjoys hiking, photography and sports. This is her first tour in the high desert which she is enjoying with her husband, Seth, a first lieutenant with CLB-7.*



**Natalie K. Monroe**



**HM2 Evan T. Fitch**

*HM2 Evan T. Fitch arrives from Portsmouth, Virg., where he spent almost six years as a lab tech. At NHTP, he's a lab tech and hematology bench supervisor. Fitch hails from Vancouver, Wash. His wife, Tyler, and their two children, Emma, almost four-years-old, and Mason, 18 months. Wife and kids are currently in Northern California and will relocate to Twentynine Palms as soon as Base housing becomes available. Fitch and his wife strongly believe in animal rescue. They have two therapy dogs, Rocky and Harley, and two cats "that just sit there and do nothing." Fitch enjoys the sunny weather in the high desert and the ability to ride his motorcycle all year.*

*Lt. Cmdr. Jason Boyce is the new department head for the Multi-Service Ward is originally from St. Louis, Mo. He arrives from San Diego where he just completed a three-year recruiting assignment heading up a 10-person medical officer recruiting team. He earned his RN degree from the University of Missouri and has recently earned a Master's degree in Health Law, a dual degree from the University of*



**Lt. Cmdr. Jason Boyce**

*California School of Medicine and California Western School of Law. Boyce is currently geobacheloring in a house in Twentynine Palms and returns to his family in San Diego most weekends. Boyce has been in the Navy for almost 26 years. He enjoys surfing when he's not studying or spending time with his family.*



**HM3 Seung Woo**

*HM3 Seung Woo arrived at Pediatrics Clinic, NHTP, after spending three and a half years at Naval Hospital Hawaii. This Southern California native is enjoying her latest assignment because it brings her closer to her family in Fullerton, Calif. Woo used to enjoy surfing along the California coast, but now she enjoys hanging out at home, going out to eat, and generally enjoying her family and the family home on weekends. Woo graduated from Sonora High School in La Habra. She attended California State, Long Beach, before joining the Navy.*

# Cmdr. Enzerillo...

*Continued from page 1*

Her most rewarding job was when she was at Walter Reed Military Medical Center. “I was the head nurse of a 48-bed triple-, quad- and double-amputee unit and we also had wounded warriors with spinal injuries, as well as burns,” she said. “It was very high profile. The president and the president’s wife, and Secretary Gates and [other VIPs] would visit. But most rewarding for me was seeing a Marine Corps quadriplegic amputee walk for the first time in the Amputee Center.”

At Walter Reed, Inzerillo also served on the Base Realignment and Closure Commission. “It was very rewarding to work with Marine liaisons and the Marine battalion commander,” she said. “I opened up the new nursing units on the 4th floor and moved all of the wounded from Walter Reed Army Medical Center and also brought together the wounded from the National Naval Medical Center.” At Walter Reed, Inzerillo managed a staff of about 100 personnel.

Today, Inzerillo’s biggest challenge is maintaining the highest quality of patient care in an aus-

tere fiscal climate. “I don’t feel they are opposing forces,” she said. “I try to match the patient’s need with a fiscally responsible decision. They are always case-by-case situations. But you always want to do the right thing for the service member.”

When asked what she finds most gratifying in her current position, Inzerillo describes facilitating the patient process. “We try to make their medical treatment plan, and all of the different aspects, the provider in town, the primary care manager, and any specialty care that they would need, as smooth as possible,” she said.

Inzerillo calls the Richmond, Virginia, area home. Her dad was a retired Marine Master Sergeant who died at the age of 42 when Inzerillo was eight-years-old. Inzerillo’s mother worked as a contract specialist for the federal government and is retired now living with her husband, Craig, in Sunset Beach, North Carolina. Inzerillo’s older sister, Cristine, lives with her husband and two children in Holly Springs, North Carolina.

“I want to continue to serve in the Navy,” Inzerillo said. “I think it’s an exciting and chal-

lenging time with the fiscal demands and the realignment after Afghanistan and Iraq and after the wartime commitments.”

She is intrigued by military medicine’s future. “I see myself always fighting for the beneficiary,” she said.

As a Naval Officer with 18 years in the Nurse Corps, Enzerillo has advice for nurses who are just starting out.

“I would tell them to ensure that they get medical surgical experience. It’s the backbone of your nursing career. It’s why as a nurse of 20 years and as a director, I don’t feel removed from being a staff nurse.”

Inzerillo lives in Twentynine Palms, California. She enjoys working out, lifting weights, walking, cooking, and just enjoying the beautiful weather here.

“Twentynine Palms is a gem of a place,” she said. “This is my second tour here. There are wonderful people. I think it’s a wonderful opportunity for anyone to get stationed here wherever they are in their career. It’s small enough that you can make a big impact and have a positive influence.”

## HEDIS Measures Care Plan Performance

***Note: The following is reprinted from the National Committee for Quality Assurance (NCQA) website: [www.ncqa.org](http://www.ncqa.org)***

Healthcare Effectiveness Data and Information Set (HEDIS) is a tool used by more than 90 percent of America's health plans to measure performance on important dimensions of care and service.

Altogether, HEDIS consists of 80 measures across five domains of care. Because so many plans collect HEDIS data, and because the measures are so specifically defined, HEDIS makes it possible to compare the performance of health plans on an "apples-to-apples" basis. Health plans also use HEDIS results themselves to see where they need to focus their improvement efforts. HEDIS measures address a broad range of important health issues. Among them are the following:

- \* Asthma Medication Use
- \* Persistence of Beta-Blocker Treatment after a Heart Attack
- \* Controlling High Blood Pressure
- \* Comprehensive Diabetes Care
- \* Breast Cancer Screening
- \* Antidepressant Medication Management
- \* Childhood and Adolescent Immunization Status
- \* Childhood and Adult Weight/BMI Assessment

Many health plans report HEDIS data to employers or use their results to make improvements in their quality of care and service. Employers, consultants, and consumers use HEDIS data, along with accreditation information, to help them select the best health plan for their needs. To ensure the validity of HEDIS results, all data are rigorously audited by certified auditors using a process designed by NCQA. Consumers also benefit from HEDIS data through the State of Health Care Quality Report, a

comprehensive look at the performance of the nation's health care system. HEDIS data also are the centerpiece of most health plan "report cards" that appear in national magazines and local newspapers.

To ensure that HEDIS stays current, NCQA has established a process to evolve the measurement set each year. NCQA's Committee on Performance Measurement, a broad-based group representing employers, consumers, health plans and others, debates and decides collectively on the content of HEDIS. This group determines what HEDIS measures are included and field tests determine how it gets measured.

Included in HEDIS is the CAHPS 5.0 survey, which measures members' satisfaction with their care in areas such as claims processing, customer service, and getting needed care quickly.

HEDIS is designed to provide purchasers and consumers with the information they need to reliably compare the performance of health care plans.

HEDIS results are included in Quality Compass, an interactive, web-based comparison tool that allows users to view plan results and benchmark information. Quality Compass users benefit from the largest database of comparative health plan perform-

ance information to conduct competitor analysis, examine quality improvement and benchmark plan performance.



# Super Stars...

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Occupational Health Nurse, Susan Page, RN/BSN, arrived in Twentynine Palms on June 17 from Stuart, FL., where she worked in the private sector for a medical manufacturing firm specializing in dental implants, artificial hips, and knees. “I would like the Occupational Health Department to be well known throughout the Base. That we not only do our required certifications, but I would like us to do health and wellness for employees as well,” she said.



Lisa Aldridge is the new Executive Assistant to the Commanding Officer and Executive Officer. Aldrige has lived in Twentynine Palms since 1982. Her husband, Daniel, just retired from the Marine Corps as a career planner. Aldridge enjoys do-it-yourself home projects, video games, and her three dogs, ages 8, 10 and 12.

Lt. Cmdr. Anne M. Jarrett (right), Chief of Audiology, recieves the Navy and Marine Corps Commendation Medal from Capt. Morris prior to PCSing to Yokosuka, Japan.



Capt. Lisa M. Morris gets an assist from husband, Ron, a paramedic with the MCAGCC Fire Station.



LTJG Ryan Rigby hails from Kaysville, Utah. He arrived to NHTP directly from Officer Development School, Newport, R.I. Rigby is the department head for Human Resources. He holds an MBA and a Master’s in Health Care Administration from Weber State University, Ogden, Utah. He and his wife, Shay, live in Yucca Valley with their three children.



Ensign Caylin Schutz is from Fullerton, Calif. She earned her RN from Sonoma State University in Northern California. Shutz is assigned to the Multi-Service Ward. She enjoys dirt-bike riding, four-wheeling, “and just about anything outdoors.” Shutz looks forward to honing her nursing skills, as well as, “leading and training my corpsmen.”



The Navy Ball was celebrated Sept. 14 at the Desert Winds Golf Course. Golf Course Manager Chuck Mastropoalo (Navy Warrant Officer 1, 1962-1970) was guest speaker. HMI Darnelle Mason was MC. Approximately 300 guests dined on steak, shrimp and chicken tacos created by three USMC teams from Phillips Mess Hall.



Vienna Lawrence, finance technician, arrived at the NHTP Comptroller’s Office after a lateral move from Mainside. She considers Twentynine Palms her hometown, having lived here for eight years. Her husband, Landers, retired from the Marine Corps after 21 years of service.



Lt. Cmdr. Matthew (Matt) Horner is the new department head for Optometry. He arrived from Guam where he held the same postion. Horner earned his undergrad degree from Oklahoma State and his Optometry degree from Northeast State University, Okla. He enjoys basketball, football, working out, and spending time with his children, ages 4 and 6.